



ecology and environment, inc.

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International Specialists in the Environmental Sciences

DATE: July 12, 1983

TO: File/USEPA Region V

FROM: Robert Bartholomew

SUBJECT: Preliminary Assessment

Illinois/TDD#R5-8212-01A-151

Rock Falls/Masonite Corporation-Roxite Fiberglass Div.

ILD061047502

EPA Region 5 Records Ctr.



327981

Attached is EPA's Preliminary Assessment Form 2070-12 for the above referenced site.

Primary information was gathered from the following source(s):

1. U. S. Environmental Protection Agency files, Chicago - Region V
2. Illinois Environmental Protection Agency files,
3. Rockfor-

Information indicates the following responsible parties should be listed. They are listed here because of space limitations:

- 1.
- 2.
- 3.

Presently, data gaps or no verification exists in the following key area(s):

- 1.
- 2.
- 3.

A review of the available data indicates that additional information will be necessary to assess the impact(s) on:

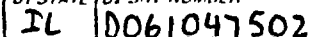
1. Groundwater contamination
2. Surface water contamination
3. Threat, if any, to public water supplies via groundwater
- 4.
- 5.

Suggested methods/sources for obtaining additional information are:

1. Site inspection or interview with site officials
2. Potential groundwater contamination study
- 3.

Notice of an apparent need for emergency action was transmitted to N/A on N/A by N/A.

<div style="display: inline-block; text-align: center;"> <p>POTENTIAL HAZARDOUS WASTE SITE PRELIMINARY ASSESSMENT PART 1 - SITE INFORMATION AND ASSESSMENT</p> </div>		I IDENTIFICATION	
		D1 STATE IL	D2 SITE NUMBER 0061047502
II. SITE NAME AND LOCATION			
D1 SITE NAME (Legal, common, or descriptive name of site) Masonite Corp. - Roxite Div.		D2 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER 803 E. 11TH Street	
D3 CITY Rock Falls	D4 STATE IL	D5 ZIP CODE 61071	D6 COUNTY Whiteside
D7 COUNTY CODE 195		D8 CONG DIST 19	
D9 COORDINATES LATITUDE 41°46'18.0"		LONGITUDE 089°40'36.0"	
D10 DIRECTIONS TO SITE (Starting from nearest public road) From US30 → north on First Ave., to E. 11TH St. Left on E. 11TH St. to the facility at 803.			
III. RESPONSIBLE PARTIES			
D1 OWNER (If known) Masonite Corporation		D2 STREET (Business, making residential) 29 N. Wacker Drive	
D3 CITY Chicago	D4 STATE IL	D5 ZIP CODE 60606	D6 TELEPHONE NUMBER (312) 372-5642
D7 OPERATOR (If known and different from owner) Mr. James T. Grigsby, Roxite Div.		D8 STREET (Business, making residential) 803 E. 11TH Street	
D9 CITY Rock Falls	D10 STATE IL	D11 ZIP CODE 61071	D12 TELEPHONE NUMBER (815) 625-8112
D13 TYPE OF OWNERSHIP (Check one): <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name: _____) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify: _____) <input type="checkbox"/> G. UNKNOWN			
D14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply) <input checked="" type="checkbox"/> A. RCRA 3001 DATE RECEIVED: 8/18/80 MONTH DAY YEAR <input checked="" type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103(c)) DATE RECEIVED: 6/5/81 MONTH DAY YEAR <input type="checkbox"/> C. NONE			
IV. CHARACTERIZATION OF POTENTIAL HAZARD			
D1 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE 11/16/82 MONTH DAY YEAR <input type="checkbox"/> NO		D2 BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input checked="" type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify: _____)	
D3 CONTRACTOR NAME(S): _____		D4 SITE STATUS (Check one) <input checked="" type="checkbox"/> A. ACTIVE <input type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN	
D5 YEARS OF OPERATION BEGINNING YEAR 1970 ENDING YEAR 1977		<input type="checkbox"/> UNKNOWN	
D6 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED Halogenated and non-halogenated solvents.			
D7 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION Former land treatment operation may potentially contaminate groundwater. Runoff may affect Illinois & Mississippi Canal. Land treatment was discontinued in 1977.			
V. PRIORITY ASSESSMENT			
D8 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information, and Part 3 - Description of Hazardous Conditions and Incidents) <input type="checkbox"/> A. HIGH (Inspection required promptly) <input type="checkbox"/> B. MEDIUM (Inspection required) <input type="checkbox"/> C. LOW (Inspect on time available basis) <input type="checkbox"/> D. NONE (No further action needed, complete current disposition form)			
VI. INFORMATION AVAILABLE FROM			
D9 CONTACT Jack Holzer	D10 OF (Agency/Organization) IEPA, Rockford		D11 TELEPHONE NUMBER (815) 987-7404
D12 PERSON RESPONSIBLE FOR ASSESSMENT	D13 AGENCY	D14 ORGANIZATION	D15 TELEPHONE NUMBER ()
D16 DATE MONTH DAY YEAR 1 1			



☒ I HIGHLY VOLATILE
☐ J EXPLOSIVE
☐ K REACTIVE
☐ L INCOMPATIBLE
☐ M NOT APPLICABLE

ecology and environment



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT

PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

01 STATE 02 SITE NUMBER

FL 0061047502

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 ☒ A. GROUNDWATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: 10,600

02 ☐ OBSERVED (DATE: _____)

☒ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

Potential groundwater contamination problem from land treatment of halogenated solvents,

01 ☒ B. SURFACE WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: <100

02 ☐ OBSERVED (DATE: _____)

☒ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

Runoff from the land treatment operation is likely to have reached the Illinois & Mississippi Canal which flows away from the Rock River.

01 ☐ C. CONTAMINATION OF AIR

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

Not likely to exist due to volatility of hazardous substances.

01 ☐ D. FIRE/EXPLOSIVE CONDITIONS

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

01 ☐ E. DIRECT CONTACT

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

01 ☒ F. CONTAMINATION OF SOIL

03 AREA POTENTIALLY AFFECTED: 5.46
(Acres)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

Cercla 103 (c) notice indicates a land treatment operation of halogenated solvents,

01 ☒ G. DRINKING WATER CONTAMINATION

03 POPULATION POTENTIALLY AFFECTED: 10,600

02 ☐ OBSERVED (DATE: _____)

☒ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

Land disposal of solvents may threaten Rock Falls municipal supply.

Permeability of unsaturated zone is unknown.

01 ☐ H. WORKER EXPOSURE/INJURY

03 WORKERS POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION

01 ☐ I. POPULATION EXPOSURE/INJURY

03 POPULATION POTENTIALLY AFFECTED: _____

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

04 NARRATIVE DESCRIPTION



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION
01 STATE 02 SITE NUMBER
IL 0061047502

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (include name(s) of species)

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

01 ☒ M. UNSTABLE CONTAINMENT OF WASTES
(Spills/runoff/standing liquids/leaking drums)

02 ☐ OBSERVED (DATE: _____) ☒ POTENTIAL ☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: ~100

04 NARRATIVE DESCRIPTION

Solvents applied to the ground with no known regard to proper containment.

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____) ☐ POTENTIAL ☐ ALLEGED

See Item F

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

III. TOTAL POPULATION POTENTIALLY AFFECTED: 10,600

IV. COMMENTS

Land treatment no longer used for disposal of solvents.
Facility has interim RCRA status.

V. SOURCES OF INFORMATION (Cite specific references e. g., state files, sample analysis, reports)

USEPA ERIS FILES - CHICAGO, REGION V